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FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZ	ATION		
1 Ortivi 1	(See instruct	ions)		Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, ty over the lines	pe 12FE4M5	
Pioneer Politic	cal Action Committee			
ADDRESS (number and	street) 701 8th Street, NW	1111111		
(Check if address is changed)	Suite 500	111111		
	Washington		L PC	20001 -
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one			
(Check if address is changed)	mgkelley@wms-jer	n.com 		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)	3			
2. DATE M. N.	30 2009	C C00325357		
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED	(A)	
I certify that I have exam	ined this Statement and to the best of my kr	nowledge and belief it is true, co	orrect and complete	
Type or Print Name of	Treasurer Virginia D. Rag	an		
Signature of Treasurer	Electronically Filed by Virginia	D. Ragan	Date 10°	/ B 3 0 / Y 2 0 0 9
NOTE: Submission of fa	lse, erroneous, or incomplete information m			
Office Use Only		For further information (Federal Election Control Free 800-424	Commission	FEC FORM 1 (Revised 02/2009)